

# **EXHIBIT 4**



NORTH DAKOTA  
**SECRETARY OF STATE**  
MICHAEL HOWE

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SECRETARY OF STATE  
600 E. BOULEVARD AVENUE, DEPT. 108  
BISMARCK, ND 58505-0500  
SOS.ND.GOV

CT CORPORATION SYSTEM - MMRA  
ALLISON WEICHEL  
120 W SWEET AVE  
BISMARCK, ND 58504

**Request Type: Copy Requests**  
Certificate #: 0006710874

Issuance Date: 06/12/2024  
Copies Requested: 1

The undersigned, as Secretary of State of the state of North Dakota, hereby certifies that **Incline Bakken, LLC**, SOS Control ID# 3041064 was formed or qualified to do business in the State of North Dakota on January 30, 2020. Incline Bakken, LLC has a home jurisdiction of DELAWARE and is currently in an Active status.

A handwritten signature in black ink that reads "Michael Howe".

Michael Howe  
Secretary of State

Image ID	Filing Description
B0251-9847	Initial Filing

COMPLETE, PRINT, SIGN, AND MAIL OR FAX (If paying by credit card, complete Credit Card Payment Authorization on page 3)



**CERTIFICATE OF AUTHORITY APPLICATION**  
**FOREIGN LIMITED LIABILITY COMPANY**  
 SECRETARY OF STATE  
 SFN 19381 (09-2015)

JAN 28 2020

SEC. OF STATE

For Office Use Only

ID Number	For Office Use Only
WO Num	<b>-FILED-</b>
SOS Control ID#	0003041064
Date Filed	1/30/2020
10-31-01, 10-31-13 1 and 10-32 1-75	

SEE INSTRUCTIONS FOR FEE, FILING AND MAILING INFORMATION

TYPE OR PRINT LEGIBLY

For reference, see North Dakota Century Code, Sections

1. The application is accompanied by the following:	
<input checked="" type="checkbox"/> *Filing fee of \$135	<input type="checkbox"/> Certificate of professional license
<input checked="" type="checkbox"/> *Current CERTIFICATE OF GOOD STANDING or CERTIFICATE OF EXISTENCE duly authenticated by the organizing officer of the state or country of organization	<input type="checkbox"/> Signed Consent to Use Business Name and fee of \$10
	<input type="checkbox"/> Trade Name Registration and fee of \$25
2. Type of limited liability company applying for certificate of authority (check one)	
<input checked="" type="checkbox"/> Foreign Business	<input type="checkbox"/> Foreign Professional
3. Federal ID Number	
4. Name of limited liability company EXACTLY as it appears on Certificate of Good Standing from state or country of origin	
Incline Bakken, LLC	
5. If applicable, provide the trade name and complete the Trade Name Registration form if selected trade name is not already registered in North Dakota. Only provide the trade name in this line if:	
a) The "new" limited liability company name is not in the form as required of limited liability companies in North Dakota.	
b) The Secretary of State has notified the limited liability company that its "new" name is the same or deceptively similar to a name already registered, and the limited liability company is unable to obtain Consent to Use Business Name from the previous filer or a certified copy of a final decree of a court of competent jurisdiction establishing prior right of this limited liability company to use of the name in North Dakota.	
c) The limited liability company does not wish to use or protect its "new" name in North Dakota and chooses to use a name other than its limited liability company name.	
6. Complete address of principal executive office (Street/RR, PO Box, City, State, ZIP+4) Street address <b>MUST</b> be provided; may not be only a post office box.	
5011 N. Central Expressway Dallas, TX 75205	
7. State or Country Where Organized	8. Limited liability company will expire in state or country of origin (check one)
Delaware	<input checked="" type="checkbox"/> Perpetual <input type="checkbox"/> Expires - Specify date: _____
9. Telephone Number	10. Toll Free Telephone Number
214-274-3800	
11A. Name of <u>commercial</u> registered agent in <u>North Dakota</u>	OR 11B. Name of <u>noncommercial</u> registered agent in <u>North Dakota</u>
Corporation Service Company	
11C. Address of <u>noncommercial</u> registered agent in <u>North Dakota</u> (Street/RR, PO Box, City, State, ZIP+4) Street address <b>MUST</b> be provided; may not be only a post office box.	
12. Nature of business or activities the limited liability company conducts or intends to conduct in North Dakota	
Oil and Gas	
13. Managers and governors of the limited liability company (attach additional sheet, if necessary)	
MANAGERS	Manager also serves as Governor
William Francis	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Managing Member	
Managing Member	
14. "The undersigned has read the foregoing application, knows the contents, and believes the statements to be true. I further authorize the Secretary of State to correct numbers 4, 7, 11A, 11B, and 11C if not correctly reflected. I understand that if I make a false statement in this document, I may be subject to criminal penalties."	
Signature	Date
	01/27/2020
15. Name of Person to Contact About This Document	
William Francis	